

This overview of the comprehensive Source Book highlights the information you could have at your fingertips – absolutely FREE – by becoming a participant in The Accommodation Program®.

## Section 1

### The Accommodation Program

Familiarizes you with The Accommodation Program and what it means to your business, your revenue, and your customers.

## Section 2

### Pleasing Customers Is Critical to Success

Research has shown that approximately 25 percent of the nation's adults choose to smoke. Satisfying the preferences of all of your customers is important to your bottom line.

## Section 3

### How to Designate Lanes and Concourse Areas

Includes an Accommodation Formula Worksheet to help you designate appropriate non-smoking and smoking sections by monitoring the seating preferences and lane assignments of your customers.

## Section 4

### How to Enhance Customer Service

Includes a step-by-step guide on how to be an accommodating proprietor and manager, how to educate employees about accommodation, and how to handle customer complaints.



## Section 5

### How to Configure Your Bowling Center

Provides tips on how to configure your bowling center and how to use the bowling center signage to maximum advantage.

## Section 6

### Enhancing Your HVAC System

Explains how to maintain air quality for maximum comfort throughout your bowling center. Also includes an 800-number directly connecting you with HVAC engineers who can discuss strategies for enhancing your HVAC system.



## Section 7

### Know Your Local/State Laws

Suggests where to find information on specific smoking regulations in your area.

## Section 8

### Signage

Explains where and how to use The Accommodation Program signage in your bowling center to communicate the smoking policy to your customers.

If you found this overview helpful and would like to receive the complete How to Become An Accommodating Bowling Center Source Book – and much more – just fill in, detach, and mail the reply card in this booklet or call 1-800-929-1414.

Courtesy of Philip Morris Incorporated



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**YES,** I'd like to participate in  
The Accommodation Program®.  
Please send me FREE signage and program materials.



Your Name (Please print clearly) \_\_\_\_\_

Your Title \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address (no P.O. boxes please!) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

(Check All That Apply)

- Restaurant:  Fine Dining  Midscale  Quick Service  
 Hotel  Bowling Center  Shopping Mall  Stadium/Arena  
 Bar/Tavern  Airport  Association  Casino  
 Other (Please Specify) \_\_\_\_\_

Chain Operator  Local  Regional  National

Independent Operator

Number of Locations \_\_\_\_\_

Yes, you may use my establishment's name as a participant of The Accommodation Program in promotional materials and advertising per my signature below.

Signature \_\_\_\_\_